

MONTANA STATE PRISON HEALTH SERVICES OPERATIONAL PROCEDURE

Procedure No.: MSP HS C-02.0	Subject: CLINICAL PERFORMANCE ENHANCEMENT	
Reference: NCCHC Standard P-C-02, 2014;		Page 1 of 2 and no attachments
Effective Date: November 1, 2010		Revised: June 1, 2017
Signature / Title: /s/ Cindy Hiner / Health Services Manager		
Signature / Title: /s/ Tristan Kohut, D.O. / Medical Director		

I. PURPOSE

To establish a process for evaluating the appropriateness of services delivered by all direct patient care clinicians, and RNs and LPNs through peer review.

II. **DEFINITIONS**

<u>Clinical Performance Enhancement</u> – the process of conducting a review of a health professional's work by another health professional of at least equal training in the same general discipline

<u>Direct patient care clinicians</u> – all licensed practitioners providing medical, dental, and mental health care including physicians, dentists, midlevel practitioners (e.g. nurse practitioners, physicians assistants), and *qualified mental health professionals*.

<u>Qualified mental health professionals</u> – psychiatrists, psychologists, psychiatric social workers, psychiatric nurses, and others who by virtue of their education, credentials, and experience are permitted by law to evaluate and care for mental health needs.

<u>Independent Review</u> – the assessment of a health care professional's compliance with discipline specific and community standards. The review includes an analysis of trends in a practitioner's clinical practice. This review may be conducted by someone who may or may not be directly employed by the institution, as long as the reviewing practitioner had not been previously involved in the care of the patient/s involved.

III. PROCEDURE

A. General requirements

- 1. All *direct patient care clinicians*, and RNs and LPNs will be reviewed by their peers on a regular basis and at least annually to assure consistent quality of care, encourage learning from peers, and provide a standard method of evaluation:
 - a. all reviews will be confidential and shared only with the individual being reviewed, the MSP Health Services Manager, and the Medical Director;
 - b. at a minimum, clinical reviews will incorporate the following:
 - 1) the name of the individual being reviewed;
 - 2) the date of the review;
 - 3) the name and credentials of the person conducting the review;
 - 4) confirmation that the review was shared with the individual being reviewed; and
 - 5) a summary of the findings and corrective action, if any.
 - c. Appropriate follow-up (i.e. *independent review*) or corrective action will be implemented by the Health Services Manager as indicated.
- 2. A basic chart review will be completed, at least annually; from a selection of each direct patient care clinician's charts (*see <u>Medical Chart Review Worksheet</u>*). At least 15 charts will be reviewed covering multiple areas, including:

Procedure No. MSP HS C-02.0	Subject: Clinical Performance Enhancement	
Effective Date: November 1, 2010		p.2 of 2

- a. Chronic care;
- b. Urgent care;
- c. Routine care: and
- d. Infirmary care.
- 3. Assessment will be based on community standard of care and will include:
 - a. completeness/relevancy of present and past history;
 - b. physical exam pertinence;
 - c. lab/diagnostics;
 - d. procedures;
 - e. treatment plan; and
 - f. appropriateness of consults and charting eligibility.
- 4. Peer case reviews may be conducted on selected on individual cases.
- 5. Tracking will include a log or written record providing the names of the primary care providers and the dates of their reviews and will be maintained by the MSP Health Services Manager
- 6 The professional practice review of RNs and LPNs (including Supervisory staff that provides clinical care) will focus on clinical skills with the purpose of enhancing competence and addressing areas in need of improvement:
 - a. this review will be designed and conducted through the Nurse Educator;
 - b. peer case reviews may be conducted on selected individual cases; and
 - c. tracking will include a log or written record providing the names of the RN/LPN and will be maintained by the Nurse Educator.
- 6. Inmate grievances may be reviewed for any relevant pattern.
- 7. An Independent Review will be implemented by the DON and/or RHA when serious concerns are noted regarding an individual provider's competence.

IV. CLOSING

Questions concerning this operational procedure will be directed to the Health Services Manager.

V. ATTACHMENTS None